

# FEC FORM 2

## STATEMENT OF CANDIDACY

SECRETARY OF THE SENATE

14 SEP 19 AM 9:36

1. (a) Name of Candidate (in full) Al Franken		
(b) Address (number and street) P.O. Box 583144		<input type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code Minneapolis MN 55458		2. Candidate's FEC Identification Number S8MN00438
4. Party Affiliation DEMOCRATIC-FARM-LABOR		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)
5. Office Sought Senate	6. State & District of Candidate MN 00	

### DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2014 election(s).  
(year of election)

**NOTE:** This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full) Al Franken for Senate 2014		
(b) Address (number and street) P.O. Box 583144		
(c) City, State, and ZIP Code Minneapolis MN 55458		

### DESIGNATION OF OTHER AUTHORIZED COMMITTEES


(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:** This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full) Franken MVPs		
(b) Address (number and street) PO Box 583144		
(c) City, State, and ZIP Code Minneapolis MN 55458		

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Signature of Candidate Al Franken 	Date 09/10/2014
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**NOTE:** Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

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# FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

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## DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)

[ ADDITIONAL ]

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Franken Senate Victory 2014

(b) Address (number and street)  
PO Box 583144

(c) City, State and ZIP Code

Minneapolis

MN

55458

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)

[ ADDITIONAL ]

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Searchlight Lake Tahoe Victory Fund

(b) Address (number and street)  
700 13th Street NW  
Suite 600

(c) City, State and ZIP Code

Washington

DC

20005

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)

[ ADDITIONAL ]

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

10,000 Lakes Victory 2014

(b) Address (number and street)  
120 Maryland Avenue NE

(c) City, State and ZIP Code

Washington

DC

20002

14020700462

# FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

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## DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)

[ ADDITIONAL ]

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:** This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Franken Udall Victory 2014

(b) Address (number and street)  
PO Box 583144

(c) City, State and ZIP Code

Minneapolis

MN

55458

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)

[ ADDITIONAL ]

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:** This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Grassroots Victory Project 2014

(b) Address (number and street)  
120 Maryland Avenue NE

(c) City, State and ZIP Code

Washington

DC

20002

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)

[ ADDITIONAL ]

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.


**NOTE:** This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

(b) Address (number and street)

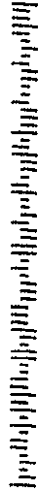
(c) City, State and ZIP Code

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NANCY ERICKSON  
SECRETARY

DANA K. MCCALLUM  
SUPERINTENDENT

HART SENATE OFFICE BUILDING  
SUITE 232  
WASHINGTON, DC 20510-7116  
PHONE: (202) 224-0322

# United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED \_\_\_\_\_

Date of Receipt

9-15-14

USPS FIRST CLASS MAIL \_\_\_\_\_

Postmark

USPS REGISTERED/CERTIFIED \_\_\_\_\_

Postmark

USPS PRIORITY MAIL \_\_\_\_\_

Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL ☐

USPS EXPRESS MAIL \_\_\_\_\_

Postmark

## OVERNIGHT DELIVERY SERVICE:

SHIPPING DATE

NEXT BUSINESS DAY DELIVERY

FEDERAL EXPRESS \_\_\_\_\_

☐

UPS \_\_\_\_\_

☐

DHL \_\_\_\_\_

☐

AIRBORNE EXPRESS \_\_\_\_\_

☐

RECEIVED FROM FEDERAL ELECTION COMMISSION \_\_\_\_\_

Date of Receipt

POSTMARK ILLEGIBLE ☐

NO POSTMARK ☐

FAX \_\_\_\_\_

Date of Receipt

OTHER \_\_\_\_\_

Date of Receipt or Postmark

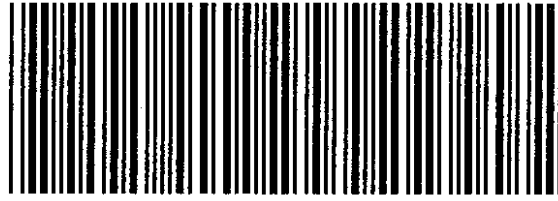
PREPARER

DH

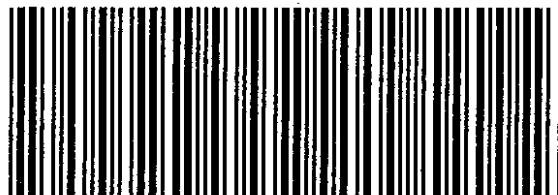
DATE PREPARED

9-17-14

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SEN PATCH



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